

## PART B - FEE(S) TRANSMITTAL

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09/02/2005

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10/13/2005 TBESHAHE 00000169 10604524

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Stuart T. Auvinen	(Depositor's name)
<i>[Signature]</i>	(Signature)
10-12-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/604,524	07/28/2003	Hin-Kwai Lee	NM-102	1523

TITLE OF INVENTION: TWO-LAYER DISPLAY-REFRESH AND VIDEO-OVERLAY ARBITRATION OF BOTH DRAM AND SRAM MEMORIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	12/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HSU, JONI	2671	345-503000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Stuart T. Auvinen  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Neomagic Corp.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☒ Payment by credit card. Form PTO-2038 is attached.  
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*[Signature]*Date 10-12-05

Typed or printed name

Stuart T. Auvinen

Registration No. 36,435

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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**Patent Agent**

429 26th Ave., Santa Cruz, CA 95062

**FAX**Date: 10/12/05Number of pages including cover: 3**To:** Issue Fee PaymentFax phone: 703-746-4000Org: Publications US PTO**From:** Stuart AuvinenPhone: (831) 476-5506Fax phone: (831) 477-0703**REMARKS:** ☐ Urgent ☐ For your review ☐ Reply ASAP ☐ Please comment

Ser. No. 10/604,524 Group 2676 Docket NM-102

**ISSUE FEE PAYMENT — EXPEDITED PROCESSING**

Please charge the issue fee and order for 10 copies to my credit card as shown on the attached issue fee transmittal form and PTO-2038.

The assignee is **NeoMagic Corp. of Santa Clara, CA.**

Please note that this is a small entity. Please charge \$730.

Thank You.

I hereby certify that this paper and issue fee transmittal form is being facsimile transmitted to the Patent and Trademark Office.

Signed Stuart T. Auvinen

Stuart T. Auvinen, Reg. No. 36,435

Date Signed and transmitted 10/12/05

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